

**THIS DECISION HAS BEEN APPEALED. THE
FOLLOWING IS THE RELATED SOAH DECISION NUMBER:**

SOAH DOCKET NO. 453-04-4719.M5

MDR Tracking Number: M5-04-0947-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305 titled Medical Dispute Resolution - General and 133.308 titled Medical Dispute Resolution by Independent Review Organizations, the Medical Review Division (Division) assigned an IRO to conduct a review of the disputed medical necessity issues between the requestor and the respondent. The dispute was received on November 26, 2003.

The Division has reviewed the enclosed IRO decision and determined that **the requestor did not prevail** on the issues of medical necessity. The IRO agrees with the previous determination that the medications hydro/apap, Carisoprodol and Celebrex, were not medically necessary. Therefore, the requestor is not entitled to reimbursement of the IRO fee.

Based on review of the disputed issues within the request, the Division has determined that fees were the only fees involved in the medical dispute to be resolved. As the medications listed above were not found to be medically necessary, reimbursement for dates of service from 12-02-02 to 05-21-03 is denied and the Division declines to issue an Order in this dispute.

This Decision is hereby issued this 9th day of March 2004.

Patricia Rodriguez
Medical Dispute Resolution Officer
Medical Review Division

PR/pr

March 4, 2004

Rosalinda Lopez
Texas Workers' Compensation Commission
Medical Dispute Resolution
Fax: (512) 804-4868

Re: Medical Dispute Resolution
MDR #: M5-04-0947-01
TWCC#:
Injured Employee:
DOI:
SS#:
IRO Certificate No.: IRO 5055

Dear Ms. Lopez:

___ has performed an independent review of the medical records of the above-named case to determine medical necessity. In performing this review, ___ reviewed relevant medical records, any documents provided by the parties referenced above, and any documentation and written information submitted in support of the dispute.

I am the Secretary & General Counsel of ___ and I certify that the reviewing healthcare professional in this case has certified to our organization that there are no known conflicts of interest that exist between him and any of the treating physicians or other health care providers or any of the physicians or other health care providers who reviewed this case for determination prior to referral to the Independent Review Organization.

The independent review was performed by a matched peer with the treating health care provider. This case was reviewed by a physician who is Board Certified in Pain Management.

REVIEWER'S REPORT

Information Provided for Review:

Correspondence
S.O.A.P. notes

Clinical History:

This patient fell and injured herself while on the job on ___, injuring her arm, shoulder, and neck. Subsequent investigations showed slightly bulging discs at 3 levels in her neck. Whether these were preexisting or a result of the injury is not determinable. She also was found to have a carpal tunnel syndrome (mild) and a cubital tunnel syndrome (also mild) on the appropriate side. It is also unknown whether this is preexisting or occurred at the time of the injury. She had therapy to both the carpal tunnel and the cubital tunnel syndrome. She has had epidural steroid injections in the cervical regions with seemingly very little improvement in her symptoms. She continues to complain of generalized, vague, upper body and neck pain.

Disputed Services:

Medications hydro/apap, Carisoprodol, Celebrex, during the period of 12/02/02 thru 05/21/03.

Decision:

The reviewer agrees with the determination of the insurance carrier and is of the opinion that the medications in dispute as listed were not medically necessary in this case.

Rationale:

The records provided for review indicate that treatment with these narcotics, muscle relaxants, and Celebrex for that extended period of time resulted in, obviously, no improvement in the patient's condition while on these drugs. Consequently, these medications were not medically necessary.

Sincerely,